

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Shingo HIRAMATSU et al.

Application No.: 10/506,327

Confirmation No.: 1247

Filed: September 2, 2004

Art Unit: 1633

For: PRODUCTION OF PHYSIOLOGICALLY
ACTIVE PROTEINS USING GENE
RECOMBINANT SILKWORMS

Examiner: F. G. Sajjadi

REQUEST FOR REFUND
(IMPROPER CHARGE OF DEPOSIT ACCOUNT)

MS 16
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

I. REFUND REQUEST

This is a request for a refund with respect to the charge to Deposit Account 02-2448 shown on the statement for the month of October 2008 for the above-identified

☒ application ☐ patent

☒ A copy of the monthly statement in which the error referred to occurs, accompanies this request.

II. FEES CHARGED FOR WHICH REFUND REQUESTED

	<u>AMOUNT OF REFUND REQUESTED</u>
<input type="checkbox"/> filing fee	_____
<input type="checkbox"/> search fee	_____
<input type="checkbox"/> examination fee	_____
<input type="checkbox"/> surcharge for filing the basic filing on a date later than the filing date of the application (37 C.F.R. § 1.16(e))	_____
and/or	
<input type="checkbox"/> surcharge for filing the oath or declaration on a date later than the filing date of the application (37 C.F.R. § 1.16(e))	_____
<input type="checkbox"/> extension of term	
<input type="checkbox"/> first month	_____
<input type="checkbox"/> second month	_____
<input type="checkbox"/> third month	_____
<input type="checkbox"/> fourth month	_____
<input checked="" type="checkbox"/> excess claims	<u>\$100</u>
<input type="checkbox"/> issue fee	_____
<input type="checkbox"/> petition fee	_____

<input type="checkbox"/>	patent maintenance fee	_____
<input type="checkbox"/>	first maintenance fee	_____
<input type="checkbox"/>	second maintenance fee	_____
<input type="checkbox"/>	third maintenance fee	_____
<input type="checkbox"/>	patent maintenance fee surcharge	_____
<input type="checkbox"/>	Other:	_____

TOTAL REFUND REQUESTED \$100

III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

We filed an Amendment on September 29, 2008, in which the total claim count was 74, and the independent claim count was 5. However, we previously paid for 91 total claims and 6 independent claims in previous filings. Therefore, the additional \$100 claim fee was in error. If the USPTO believes that the claim fee is still proper, we kindly ask that the USPTO send a detailed calculation as to why the fee is necessary.

IV. MANNER OF REFUND

Please make refund by crediting Account No. 02-2448.

We respectfully request that the attached copy of this letter be returned to us with an indication that the credit has been processed.

Application No.: 10/506,327

Docket No.: 0210-0190PUS1

Dated: NOV 3 2008

Respectfully submitted,

By 

Andrew D. Meikle

Registration No.: 32,868

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Oct 2008 Deposit Account Reconciliation

Date	Reference No.	Docket Number	Fee Code	BSKB Code	Fee	Comment
27-Oct	10506327	0210-0190PUS1	1202	DAC	\$100.00	